




Lady-Zoe G. Horace

AVP Recovery Officer

Bank of America  
RII-121-01-30, 125 Dupont Drive  
Providence, RI 02907  
T 401.865.7125 F 401.865.7885  
lady-zoe.g.horace@bankofamerica.com

Bank of America 



## Certificate of Authority to Act for First Franklin Financial

I, the undersigned, Shannon C. Smith, as AVP; Vendor Manager I of First Franklin Financial, do hereby certify that Lady-Zoe G. Horace's authority to act on behalf of First Franklin Financial, includes, without limitation, the recovery of unclaimed funds arising from bankruptcy matters.

IN WITNESS HEREOF, I have hereunto signed my name this 6<sup>th</sup> day of April, 2015.

First Franklin Financial

Shannon C. Smith

Corporate seal

If corporate Seal is unavailable sign affidavit below:

BE IT ACKNOWLEDGED,

That the undersigned hereby says under oath that the corporate seal for this corporation is unavailable

By: Shannon C. Smith  
AVP; Vendor Manager I

Notary Statement

ACKNOWLEDGMENT

STATE OF Rhode Island)

COUNTY OF Providence)

Before me, the undersigned a Notary Public, in and for said County and State on this 6 day of April, 2015 personally appeared Shannon C. Smith to me known to be the identical person who subscribed his/her name to the foregoing instrument, as its Vendor Manager and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed of such corporation, for the purposes therein set forth.

In Witness Whereof, I have hereunto set my official signature and affixed my official seal the day and year first above written.

My Commission Expires:

2/25/18

Notary

Sharon L. Randall

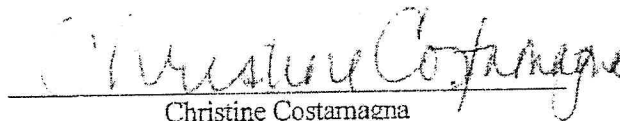
SHARON L. RANDALL  
NOTARY PUBLIC  
STATE OF RHODE ISLAND  
MY COMMISSION EXPIRES FEB. 25, 2018

**ASSISTANT SECRETARY'S CERTIFICATE OF  
BANK OF AMERICA CORPORATION**

The undersigned, Christine Costamagna, an Assistant Secretary of Bank of America Corporation ("BAC"), a corporation formed and existing under and by virtue of the laws of the State of Delaware, does hereby certify that:

First Franklin Financial Corporation, a Delaware corporation, is an indirect subsidiary of BAC.

IN WITNESS WHEREOF, I have hereto set my hand on this 16<sup>th</sup> day of March, 2015.

  
\_\_\_\_\_  
Christine Costamagna  
Assistant Secretary

10-K 1 bac-12312013x10k.htm 10-K

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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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**FORM 10-K**

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(Mark One)

☒ ANNUAL REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934  
For the fiscal year ended December 31, 2013

or

☐ TRANSITION REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934  
For the transition period from to

Commission file number:  
1-6523

Exact name of registrant as specified in its charter:

**Bank of America Corporation**

State or other jurisdiction of incorporation or organization:  
Delaware

IRS Employer Identification No.:  
56-0906609

Address of principal executive offices:  
Bank of America Corporate Center  
100 N. Tryon Street  
Charlotte, North Carolina 28255

Registrant's telephone number, including area code:  
(704) 386-5681

Securities registered pursuant to section 12(b) of the Act:

Title of each class	Name of each exchange on which registered
Common Stock, par value \$0.01 per share	New York Stock Exchange London Stock Exchange Tokyo Stock Exchange
Warrants to purchase Common Stock (expiring October 28, 2018)	New York Stock Exchange
Warrants to purchase Common Stock (expiring January 16, 2019)	New York Stock Exchange
Depository Shares, each representing a 1/1,000th interest in a share of 6.204% Non-Cumulative Preferred Stock, Series D	New York Stock Exchange
Depository Shares, each representing a 1/1,000th interest in a share of Floating Rate Non-Cumulative Preferred Stock, Series E	New York Stock Exchange
Depository Shares, each representing a 1/1,000th interest in a share of 6.625% Non-Cumulative Preferred Stock, Series L	New York Stock Exchange
7.25% Non-Cumulative Perpetual Convertible Preferred Stock, Series L	New York Stock Exchange
Depository Shares, each representing a 1/1,200th interest in a share of Bank of America Corporation Floating Rate Non-Cumulative Preferred Stock, Series 1	New York Stock Exchange

Name	Location	Jurisdiction
FIA (Gibraltar) Holdings Limited	Gibraltar, Gibraltar	Gibraltar
FIA (Gibraltar) SLP Holdings Limited	Gibraltar, Gibraltar	Gibraltar
FIA Holdings, LP	Edinburgh, Scotland	Scotland
FIA Holdings S.a.r.l.	Luxembourg, Luxembourg	Luxembourg
FIA Jersey Holdings Limited	Chester, United Kingdom	Jersey
FIA Swiss Funding Limited	Luxembourg, Luxembourg	England & Wales
FIA UK Funding Limited	Chester, United Kingdom	England & Wales
Fiduciary Services Ltd.	George Town, Grand Cayman, Cayman Is.	Cayman Islands
Fiduciary Services (UK) Limited	London, U.K.	England
Financial Data Services, Inc.	Jacksonville, FL	Florida
First Bank of Pinellas County Land Corporation	Tampa, FL	Florida
First Capital Corporation of Boston	Boston, MA	Massachusetts
First Franklin Financial Corporation	San Jose, CA	Delaware
First Permanent Financial Services Pty Ltd	Sydney, Australia	Australia
First Permanent Securities Limited	Sydney, Australia	Australia
Firstval Properties, Inc.	Bethlehem, PA	Pennsylvania
Five Dollars a Day, LLC	San Francisco, CA	Delaware
Fleet Capital Trust V	Boston, MA	Delaware
Fleet Development Ventures L.L.C.	Boston, MA	Massachusetts
Fleet Fund Investors, LLC	Providence, RI	Delaware
Fleet Growth Resources III, Inc.	Charlotte, NC	Rhode Island
Fleet Growth Resources IV, Inc.	Charlotte, NC	Rhode Island
Fleet Growth Resources, Inc.	Charlotte, NC	Delaware
Fleet International Advisors S.A.	Montevideo, Uruguay	Uruguay
Fleet Venture Resources, Inc.	Charlotte, NC	Rhode Island
FM Sponsor I, LLC	New York, NY	Maryland
Fondo Espanol de Recuperaciones B.V.	Amsterdam, The Netherlands	Netherlands
Fondo Espanol de Recuperaciones II B.V.	Amsterdam, The Netherlands	Netherlands
Framework, Inc.	Washington, DC	Delaware
FSC Corp.	Boston, MA	Massachusetts
Fugu Credit Limited	London, U.K.	United Kingdom
Fund Five Financial, Inc.	San Francisco, CA	California
Fundamental Partners Municipal Trust	New York, NY	Delaware
Fundo de Investimento em Direito Creditorio Nao Padronizado Tratex Precatorios II	Sao Paulo, Brazil	Brazil
Fundo de Investimento em Direitos Creditorios Nao Padronizados Tratex Precatorio III	Sao Paulo, Brazil	Brazil
Fundo de Investimento em Direito Creditorio PCG Brasil Multi Carteira	Sao Paulo, Brazil	Brazil
Fundo de Investimento Financeiro Multimercado Diamond	Sao Paulo, Brazil	Brazil
Fundo de Investimento Financeiro Multimercado Iceberg	Sao Paulo, Brazil	Brazil
Fundo de Investimento Financeiro Multimercado Verona	Sao Paulo, Brazil	Brazil
Fundo de Investimento Multimercado Agata - Credito Privado - Investimentos no Exterior	Sao Paulo, Brazil	Brazil
Galway Holdings Trust	Dublin, Ireland	Ireland
Garden Property LLC	Pennington, NJ	Delaware
Gatwick LLC	Charlotte, NC	Delaware
GEM 21 s.r.l.	Milan, Italy	Italy
General Fidelity Life Insurance Company	Columbia, SC	South Carolina
General Pacific Holdings, LLC	New York, NY	Delaware
GK Nagareyama	Tokyo, Japan	Japan
Gleneagles Trading LLC	Charlotte, NC	Delaware
Glenwood Investments Limited	George Town, Grand Cayman, Cayman Is.	Cayman Islands
Global Banking and Financial Services Trust	New York, NY	Delaware
Global Macro Opportunities LLC	New York, NY	Delaware
Global Macro Opportunities Ltd.	New York, NY	Cayman Islands
Global Principal Finance Company, LLC	New York, NY	Delaware
Global Structured Finance & Investments LLC	New York, NY	Delaware
GlobalLoans International Technology Limited Partnership	Dartford, United Kingdom	England
GlobalLoans JV Limited Partnership	Dartford, United Kingdom	England
GMI Strategic Investments, LLC	New York, NY	Delaware
Gold Magnet (BVI) Limited	Tortola, British Virgin Islands	Virgin Islands
Goldbourne Park Limited	Charlotte, NC	Jersey
Golden Peak Investments LLC	Charlotte, NC	Delaware

Doc ID -->

201305700827



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
02/27/2013	201305700827	FOREIGN/SURRENDER BY DISSOLUTION (SUD)	50.00	.00		.00	.00

**Receipt**

This is not a bill. Please do not remit payment.

C.T. CORPORATION SYSTEM  
ATTN: JAMES H. TANKS III  
4400 EASTON COMMONS WAY, SUITE 125  
COLUMBUS, OH 43219

**STATE OF OHIO  
CERTIFICATE**

**Ohio Secretary of State, Jon Husted**

1191555

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

**HOME LOAN SERVICES, INC.**

and, that said business records show the filing and recording of:

Document(s):

**FOREIGN/SURRENDER BY DISSOLUTION**

Document No(s):

**201305700827**

Effective Date: 02/22/2013

This license has been cancelled.



United States of America  
State of Ohio  
Office of the Secretary of State

Witness my hand and the seal of the  
Secretary of State at Columbus,  
Ohio this 27th day of February, A.D.  
2013.

Ohio Secretary of State

Doc ID -->

201305700827

*Jon Husted*

Form 592 Prescribed by:  
Ohio Secretary of State  
**JON HUSTED**  
Ohio Secretary of State

Central Ohio: (614) 466-3910  
Toll Free: (877) SOS-FILE (767-3453)  
www.OhioSecretaryofState.gov  
Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Filing (non expedite)  
P.O. Box 1329  
Columbus, OH 43216

Expedite Filing (Two-business day processing  
time requires an additional \$100.00).  
P.O. Box 1390  
Columbus, OH 43216

## Statement Under Section 1703.17

(For Foreign, Profit or Nonprofit)  
(999-SUD or 999-SUC)  
Filing Fee: \$50.00

Pursuant to the provisions of Section 1703.17 of the Revised Code of Ohio,

Home Loan Services, Inc.

Name of Corporation

1191555

Ohio License No.

corporation organized under the laws of Delaware states that the address to which the  
Jurisdiction of Formation

Secretary of State may mail any process against such corporation that may be served upon him, and may mail any other  
notices, certificates, or statements to

30870 Russell Ranch Road

Mailing Address

Westlake Village

City

CA

State

91361

ZIP Code

Signature

*Devra Lindgren*

Name

Devra Lindgren

Title

Secretary

**NOTE:** This form must accompany a certificate from the corporation's jurisdiction of formation which reflects that the entity  
dissolved or its corporate existence otherwise terminated or a certified copy of a court order terminating the existence of the  
corporation.

Form 592

Page 1 of 2

Last Revised: 1/9/12

047 - DATE 12/01/12 Western Union of Ohio

Doc ID -->

201305700827

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT  
COPY OF THE CERTIFICATE OF MERGER OF "HOME LOAN SERVICES, INC.",  
FILED IN THIS OFFICE ON THE THIRTEENTH DAY OF OCTOBER, A.D.  
2010, AT 4:51 O'CLOCK P.M.

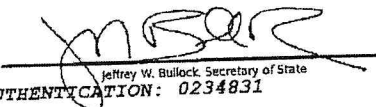
AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF  
THE AFORESAID CERTIFICATE OF MERGER IS THE SIXTEENTH DAY OF  
OCTOBER, A.D. 2010, AT 12:01 O'CLOCK A.M.

2839076 8100

130214565

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0234831

DATE: 02-22-13



Doc ID -->

201305700827

State of Delaware  
Secretary of State  
Division of Corporations  
Delivered 05:03 PM 10/13/2010  
FILED 04:51 PM 10/13/2010  
SRV 100993061 - 2839076 FILE

**STATE OF DELAWARE  
CERTIFICATE OF MERGER OF  
DOMESTIC CORPORATION AND  
FOREIGN LIMITED PARTNERSHIP**

Pursuant to Title 8, Section 263(c) of the Delaware General Corporation Law, the undersigned corporation executed the following Certificate of Merger:

**FIRST:** The name of the surviving limited partnership is BAC Home Loans Servicing, LP, a Texas limited partnership, and the name of the corporation being merged into this surviving partnership is Home Loan Services, Inc., a Delaware Corporation.

**SECOND:** The Agreement of Merger has been approved, adopted, certified, executed and acknowledged by the surviving limited partnership and the merging corporation.

**THIRD:** The name of the surviving partnership is BAC Home Loans Servicing, LP.

**FOURTH:** The merger is to become effective on October 16, 2010 at 12:01 a.m. ET.

**FIFTH:** The Agreement of Merger is on file at 6400 Legacy Drive, Plano, Texas 75024, the place of business of the surviving limited partnership.

**SIXTH:** A copy of the Agreement of Merger will be furnished by the surviving limited partnership on request, without cost, to any partner of any constituent limited partnership or stockholder of any constituent corporation.

**SEVENTH:** The surviving limited partnership agrees that it may be served with process in the State of Delaware in any proceeding for enforcement of any obligation of any constituent corporation or limited partnership of Delaware, as well as for enforcement of any obligation of the surviving limited partnership arising from this merger, including any suit or other proceeding to enforce the rights of any stockholders as determined in appraisal proceedings pursuant to the provisions of Section 262 of the Delaware General Corporation laws, and irrevocably appoints the Secretary of State of Delaware as its agent to accept service of process in any such suit or proceeding. The Secretary of State shall mail any such process to the surviving limited partnership at 30870 Russell Ranch Road Westlake Village, CA 91361.

Doc ID -->

201305700827

IN WITNESS WHEREOF, said Partnership has caused this certificate to be signed by a  
general partner, the 13<sup>th</sup> day of October, A.D., 2010.

By: [Signature]  
General Partner

Name: Tim Huval  
Print or Type

Title: President of BAC GP, L.L.C., General Partner

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AO 213  
(Rev. 08/13)

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS  
Accounting and Financial Systems Division

**VENDOR INFORMATION/TIN CERTIFICATION**  
Mandatory Information that MUST be provided before submission

<input type="checkbox"/> Ex-AO Employee
<input type="checkbox"/> SAM Vendor (Formerly CCR)
(No TIN Certification Required)

Vendor Address	Other Address (If different from Vendor Address)
Select all that apply <input type="checkbox"/> Order <input type="checkbox"/> Remit <input checked="" type="checkbox"/> 1099	Select all that apply <input type="checkbox"/> Order <input type="checkbox"/> Remit <input type="checkbox"/> 1099
Name: First Franklin Financial	Address: C/O APL, Inc., 3855 South Boulevard, Suite 200
Business Name: (if different from above)	City: Edmond
Address 1: 125 Dupont Drive / RI1 121 01 30	State: OK Zip Code: 73013
Address 2:	Phone #: (405) 340-4900
City: Providence	Description: (if needed)
State: RI Zip Code: 02907	
Phone #: (401) 865-7125 E-mail: lady-zoe.g.horace@bankofamerica.com	
Taxpayer Identification #: 51-0528989 (TIN, SS, or EIN number)	
DUNS #	
Financial Information (If Requested)	
Bank Name: Financial information is not required at this time.	Routing # (this nine digit number appears on your checks, but do not include individual check numbers):
City:	Account #:
State: Zip Code:	Type of Account: (select one) <input type="checkbox"/> Checking <input type="checkbox"/> Savings

Type of Organization for 1099 reporting:

- ☐ sole proprietorship;  
☒ corporate entity (not tax-exempt);  
☐ health care provider;  
☐ government entity (write in either federal, state or local)

- ☐ partnership;  
☐ corporate entity (tax-exempt);  
☐ other: \_\_\_\_\_

**Taxpayer Identification Number Certification**

Under penalties of perjury, I certify that:

1. The Taxpayer Identification Number listed in the Vendor Address area above is the correct number assigned to me, and
  2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest and dividends, or (c) the IRS has notified me that I am no longer subject to the backup withholding, and
  3. I am a U.S. citizen or other U.S. person (defined below).
- ☐ You must select this check box if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. If you make a false statement with no reasonable basis that results in no backup withholdings, you are subject to a \$500 penalty. Willfully falsifying certifications or affirmations on this form may subject you to criminal penalties including fines and/or imprisonment.

AO 213  
(Rev. 08/13)

**Definitions:**

"Taxpayer Identification (*TIN, SS, or EIN number*)" is the number required by the Internal Revenue Service (IRS) to be used in reporting income tax and other returns. The TIN may be either a social security number (SSN) or an employer identification number (EIN).

"U.S. person" means:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States.

The TIN, as well as the information above is required in order to comply with debt collection requirements of 31 U.S.C. §§ 7701(c) and 3325(d), reporting requirements of 26 U.S.C. §§ 6041 and 6041A, and implementing regulations issued by the IRS. Failure or refusal to furnish this information may result in 28 percent backup withholding on any payments otherwise due under any awarded contract or purchase order.

The TIN may be used by the government to collect and report on any delinquent amounts arising out of the vendor's relationship with the government (31 U.S.C. § 7701(c)(3)). The TIN provided may be matched with IRS records to verify its accuracy.

Complete this section only if a TIN was not provided on page one, and select closest reason why not:

- ☐ The vendor is a nonresident alien, foreign corporation or foreign partnership that does not have income effectively connected with the conduct of a trade or business in the United States and does not have an office or place of business or a fiscal paying agent in the United States;
- ☐ The vendor is an agency or instrumentality of a foreign government;

**Additional information required for vendors used for procurement  
(purchase orders, contracts, etc.)**

Indicate which, if any, of the following categories are applicable. These categories require that the vendor is 51% owned and the management and daily operations are controlled by one or more members of the selected socio-economic group:

- ☐ Women Owned Business
- ☐ Minority Owned Business (*If yes, select one of the owner's race/ethnicity selections from below*):
  - ☐ Asian-Pacific American
  - ☐ Black American
  - ☐ Subcontinent Asian (Asian-Indian) American
  - ☐ Hispanic American
  - ☐ Native American
  - ☐ Other: \_\_\_\_\_
- ☐ Not Applicable

Date: 4-6-15

[Signature]  
Vendor's signature

**For Agency Use Only**

The vendor name and DUNS number is all that is required for registered System for Award Management (SAM) vendors (formerly CCR). (Check [www.sam.gov](http://www.sam.gov) for registration status.) Do not use this form for purchase card merchants.

Mark Boxes that apply: ☐ Addition ☐ Change ☐ Vendor Code: \_\_\_\_\_ (make entry only if change)  
☐ Active ☐ Inactive ☐ Vendor Type: \_\_\_\_\_

The following information is optional for individuals whose name and telephone are already on the form:

Contact Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Identification of person making this request:

Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Originating Office: \_\_\_\_\_

Please type or print clearly.

For "AO" FAS4T Users only, e-mail the completed form to: [AODb\\_OFB\\_Client\\_Service\\_Desk@DCA/AO/USCOURTS](mailto:AODb_OFB_Client_Service_Desk@DCA/AO/USCOURTS). For questions regarding AOFAS4T the Client Service Desk can be contacted at (202) 502-2242.  
For "Court" FAS4T Users, send this form to the local Vendor Administrator. For questions regarding Court FAS4T please contact SDSD at (210) 301-6320.

This form should be completed with signature by the vendor and submitted by Judiciary staff only.  
Sensitive information must be securely maintained and only visible to the appropriately designated financial employee.

Form **W-9**  
(Rev. August 2013)  
Department of the Treasury  
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Print or type  
See Specific Instructions on page 2.

Name (as shown on your income tax return)  
**First Franklin Financial**

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:  
☐ Individual/sole proprietor    ☐ C Corporation    ☐ S Corporation    ☐ Partnership    ☐ Trust/estate  
☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_  
☐ Other (see instructions) ▶ \_\_\_\_\_

Exemptions (see instructions):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_

Address (number, street, and apt. or suite no.)  
**125 Dupont Drive / R11 21 01 30**

City, state, and ZIP code  
**Providence, RI 02907**

Requester's name and address (optional)

List account number(s) here (optional)

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

			-			-				
--	--	--	---	--	--	---	--	--	--	--

Employer identification number

5	1	-	0	5	2	8	9	8	9
---	---	---	---	---	---	---	---	---	---

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign  
Here

Signature of  
U.S. person ▶

*[Handwritten Signature]*

Date ▶ **4-6-15**

## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on [www.irs.gov/w9](http://www.irs.gov/w9) for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.